CASE FILING STATEMENT - Informational Only; Not Retained in Case Records

Documents for the following case types may <u>not</u> be eFiled (submitted through File & Serve):

- Abuse & Neglect
- Mental Illness
- Involuntary Commitments (Drug/Alcohol Abuse)

- Adoption
- Small Claims (claim & initial filings only)
- Juvenile Records
- Safekeeping of a Will

Provide the Case File No. for the record you are filing into or the Case Type if initiating a new action:

*Available Case Type options can be found on the UJS internet website at http://ujs.sd.gov/Information/Attorneys.aspx.

Social Security Numbers (not Driver's License Numbers) must be provided for divorce, child support, & paternity cases, 42 USC 666(a)(13)(B). All filers are <u>required</u> to provide the SSN <u>or</u> DL# for each of <u>their</u> participants regardless of the case type.

INFORMATION FOR PLAINTIFF/PETITIONER/APPLICANT:

| Check if Same as Physical Mailing Address City State Zip Date of Birth: | Last/Business Name | First Name | | Middle | Suffix |
|---|--|--|----------------------|-----------------|--|
| Check if Same as Physical State Zip | | | | | |
| Mailing Address City Date of Birth: | Physical Address | City | | State | Zip |
| Date of Birth: | ☐ Check if Same as Ph | nysical | | | |
| Phone No. Social Security No. Driver's License No. State Employer ID (if plf is a business Attorney: Last Name First Phone No. State Bar ID # Mailing Address City State Zip NFORMATION FOR DEFENDANT/RESPONDENT: ast/Business Name First Name Middle Suffix hysical Address City State Zip Check if Same as Physical Mailing Address City State Zip Date of Birth: mo/day/ yr hone No. Social Security No. Driver's License No. State Employer ID (if def is a business) | Mailing Address | City | | State | Zip |
| Attorney: Last Name | | Date of | Birth: mo/day/ yr | _ | |
| Last Name First Phone No State Bar ID # Mailing Address City State Zip NFORMATION FOR DEFENDANT/RESPONDENT: Ast/Business Name First Name Middle Suffix Physical Address City State Zip Check if Same as Physical Mailing Address City State Zip Date of Birth: | Phone No. | Social Security No. | Driver's License No. | State | Employer ID (if plf is a business) |
| Asst/Business Name First Name Middle Suffix Chysical Address City State Zip Check if Same as Physical Mailing Address City State Zip Date of Birth: mo/day/ yr Chone No. Social Security No. Driver's License No. State Employer ID (if def is a business) | Attorney: Last Name | First | Phone No | S | state Bar ID # |
| NFORMATION FOR DEFENDANT/RESPONDENT: | | | | | |
| Asst/Business Name First Name Middle Suffix Physical Address City State Zip Mailing Address City State Zip Date of Birth: mo/day/ yr Phone No. Social Security No. Driver's License No. State Employer ID (if def is a business) | Mailing Address | City | State | | Zip |
| Check if Same as Physical Mailing Address City Date of Birth: mo/day/ yr Phone No. Social Security No. Driver's License No. State Employer ID (if def is a business) | | | | | |
| Mailing Address City Date of Birth: mo/day/ yr Phone No. Social Security No. Driver's License No. State Employer ID (if def is a business) | .ast/Business Name | First Name | | Лiddle | Suffix |
| Date of Birth: mo/day/ yr Phone No. Social Security No. Driver's License No. State Employer ID (if def is a business) Attorney: | ast/Business Name Physical Address | | | | _ |
| mo/day/ yr Phone No. Social Security No. Driver's License No. State Employer ID (if def is a business) Attorney: | Physical Address | City | | | _ |
| Attorney: | Physical Address Check if Same as Phy | City | S | tate | Zip |
| Attorney: | Physical Address Check if Same as Phy | City | Sirth: | tate | Zip |
| Last Name First Phone No State Bar ID # | Physical Address Check if Same as Phy Mailing Address | City Sical City Date of B | Sirth: | tate tate | Zip Zip |
| | Physical Address Check if Same as Phy Mailing Address Phone No. | City Sical City Date of B | Sirth: | tate tate | Zip |
| | Physical Address Check if Same as Phy Mailing Address Phone No. | City City Date of B Social Security No. | Sirth: | tate tate State | Zip Zip Employer ID (if def is a business) |

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